

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	18	705951	10/26
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		605955	11/12

## INDEX OF CLAIMS

5/8

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/26/92
2	✓	✓	10/26/92
3	✓	✓	10/26/92
4	✓	✓	10/26/92
5	✓	✓	10/26/92
6	✓	✓	10/26/92
7	✓	✓	10/26/92
8	✓	✓	10/26/92
9	✓	✓	10/26/92
10	✓	✓	10/26/92
11	✓	✓	10/26/92
12	✓	✓	10/26/92
13	✓	✓	10/26/92
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28	✓	✓	10/26/92
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here.

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